UNITED STATES BANKRUPTCY COURT INVOLUNTARY District of New Hampshire **PETITION** IN RE (Name of Debtor - If Individual: Last, First, Middle) ALL OTHER NAMES used by debtor in the last 8 years (Include married, maiden, and trade names.) C L and M, Inc. Commercial Project Loan Servicing Last four digits of Social-Security or other Individual's Tax-I.D. No./Complete EIN (If more than one, state all.): STREET ADDRESS OF DEBTOR (No. and street, city, state, and zip code) MAILING ADDRESS OF DEBTOR (If different from street address). 15 Northview Drive Meredith, New Hampshire 03253 COUNTY OF RESIDENCE OR PRINCIPAL PLACE OF BUSINESS Belknap ZIP CODE ZIP CODE LOCATION OF PRINCIPAL ASSETS OF BUSINESS DEBTOR (If different from previously listed addresses) CHAPTER OF BANKRUPTCY CODE UNDER WHICH PETITION IS FILED Chapter 7 ☐ Chapter 11 INFORMATION REGARDING DEBTOR (Check applicable boxes) Nature of Debts Type of Debtor Nature of Business (Check one box.) (Form of Organization) (Check one box.) ☐ Individual (Includes Joint Debtor) □ Health Care Business Petitioners believe: □ Single Asset Real Estate as defined in ✓ Corporation (Includes LLC and LLP) 11 Ŭ.S.C. § 101(51)(B) ☐ Partnership Debts are primarily consumer debts Railroad Other (If debtor is not one of the above entities, a Stockbroker Debts are primarily business debts check this box and state type of entity below.) Commodity Broker Clearing Bank 🗸 Other VENUE FILING FEE (Check one box) Debtor has been domiciled or has had a residence, principal Full Filing Fee attached place of business, or principal assets in the District for 180 days immediately preceding the date of this petition or for Petitioner is a child support creditor or its representative, and the form a longer part of such 180 days than in any other District. specified in § 304(g) of the Bankruptcy Reform Act of 1994 is attached. [If a child support creditor or its representative is a petitioner, and if the D A bankruptcy case concerning debtor's affiliate, general petitioner files the form specified in § 304(g) of the Bunkruptcy Reform Act of partner or partnership is pending in this District. 1994, no fee is required.] PENDING BANKRUPTCY CASE FILED BY OR AGAINST ANY PARTNER OR AFFILIATE OF THIS DEBTOR (Report information for any additional cases on attached sheets.) Name of Debtor Case Number Date Relationship District Judge ALLEGATIONS (Check applicable boxes) COURT USE ONLY Petitioner (s) are eligible to file this petition pursuant to 11 U.S.C. § 303 (b). The debtor is a person against whom an order for relief may be entered under title 11 of the United 3.a. The debtor is generally not paying such debtor's debts as they become due, unless such debts are the subject of a bona fide dispute as to liability or amount;

b.

Within 120 days preceding the filing of this petition, a custodian, other than a trustee receiver, or agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.

Name of Debtor	C L and M, Inc.
-	

Case No.

Check this box if there has been a transfer of any claim aga	SFER OF CLAIM Linst the debtor by or to any petitic	oner Attach all documents that
evidence the transfer and any statements that are required t	inder Bankruptev Rule 1003(a).	oner. Attach an documents that
REQUES	ST FOR RELIEF	
Petitioner(s) request that an order for relief be entered against the debetition. If any petitioner is a foreign representative appointed in a foreign representative appointed appointed in a foreign representative appointed appoin	ptor under the chapter of title 11, Unit	ted States Code, specified in this
recognition is attached.	neigh proceeding, a certified copy of	the order of the court granting
Petitioner(s) declare under penalty of perjury that the foregoing is tru correct according to the best of their knowledge, information, and bel	e and	
to neer according to the sear of their knowledge, information, and be	161.	
X	x	11/20/2009
Signature of Petitioner or Representative (State title) NH Banking Department 11/20/2009	Signature of Attorney Office of the Attorney C	Date
Name of Petitioner Date Signed	Name of Attorney Firm (If an	oenerar W
	Name of Attorney Firm (If ar 33 Capitol Street, Conc	ord, NH 03301
Name & Mailing Peter C. Hildreth Address of Individual 53 Regional Drive	Address	
State of the state	(603) 271-3679 Telephone No.	
Concord, NH 03301	тетернове 140.	
	The state of the s	
		THE RESERVE THE PROPERTY OF TH
X	x	
Signature of Petitioner or Representative (State title)	Signature of Attorney	Date
Name of Petitioner Date Signed	John L. Ahlgren Name of Attorney Firm (If any	
2 2 10 o ignor	PO Box 1211, Portsmou	y) uth NH 03802
Name & Mailing	Address	
Address of Individual Dover, NH 03820 Signing in Representative	(603) 431-4522	
Capacity	Telephone No.	
X	x	
Signature of Petitioner or Representative (State title)	Signature of Attorney	Date
Name of Petitioner Date Signed	John L. Ahlgren Name of Attorney Firm (If any)	1
•	Name of Attorney Firm (If any PO Box 1211, Portsmouth	h NH 03802
Name & Mailing Address of Individual Stratham, NH 03885	Address	
Address of Individual Stratham, NH 03885 Signing in Representative	(603) 431-4522 Telephone No.	
Capacity	reteptione No.	
PETITIONIN	G CREDITORS	
lame and Address of Petitioner	Nature of Claim	Amount of Claim
N.H. Banking Department	investigation fees & costs	42,750.00
lame and Address of Petitioner	Nature of Claim	
1e	į.	Amount of Claim
	investment mgmt	400,000.00
ame and Address of Petitioner	Nature of Claim	Amount of Claim
e	investment mgmt	255,000.00
ote: If there are more than three petitioners, attach additional sheet	s with the statement under	Total Amount of Petitioners'
penalty of perjury, each petitioner's signature under the statem and petitioning creditor information in the format above.	nent and the name of attorney	Claims 697,750.00
	sheets attached	097,750.00

UNITED STATES BANKRUPTCY COURT

District of New Hampshire

INVOLUNTARY PETITION

	1		PETITION	
IN RE (Name of Debtor - If Individua): Last, Firs	t, Middle)	ALL OTHER NAM	AES used by debtor in the last 8 years	
FINANCIAL RESOURCES MORTGA	AGE INC		naiden, and trade names.)	
FI		Financial Res	Financial Resources & Assistance of the Lakes	
Last four digits of Social-Security or other individ (If more than one, state all.):	ual's Tax-1.D. No/Complete		ources National, Inc.	
STREET ADDRESS OF DEBTOR (No. and street	, city, state, and zip code)	MAILING ADDRE	SSS OF DEBTOR (If different from street address)	
15 Northview Drive Meredith, New Hampshire 03253				
COUNTY OF RESIDENCE OR PRINCIPAL PLA Belknap		0000		
	21P	CODE	ZIP CODE	
LOCATION OF PRINCIPAL ASSETS OF BUSIN	ESS DEBTOR (If different	from previously listed address	25)	
CHAPTER OF BANKRUPTCY CODE UNDER W	HICH PETITION IS FILEE)		
INFO	RMATION REGARDING	DEBTOR (Check applicable	2 boxes)	
Nature of Debts (Check one box.)		of Debtor	Nature of Business	
	☐ Individual (Includes	Organization) Joint Debtor)	(Check one box.) □ Health Care Business	
Petitioners believe:		s LLC and LLP)	□ Single Asset Real Estate as defined in 11 U.S.C. § 101(51)(B)	
D Debts are primarily consumer debts	Partnership Other (If debter is no	t one of the above entities,	□ Railroad	
✓ Debts are primarily business debts	check this box and sta	it one of the above entities, ate type of entity below.)	□ Stockbroker □ Commodity Broker	
			□ Clearing Bank	
ACOMIAD		7	√ Other	
VENUE		F	TLING FEE (Check one box)	
Debtor has been domiciled or has had a residence, place of business, or principal assets in the District	principal for 180	▼ Full Filing Fee attached		
days immediately preceding the date of this petitio	n or for	Petitioner is a child supp	ort creditor or its representative, and the form	
a longer part of such 180 days than in any other Di	strict.	specified in § 304(g) of t	he Bankruptcy Reform Act of 1994 is attached, or its representative is a petitioner, and if the	
 A bankruptcy case concerning debtor's affiliate, ge partner or partnership is pending in this District. 	neral	petitioner files the form spec 1994, no fee is required.]	ified in § 304(g) of the Bankruptcy Reform Act of	
PENDING BANKRU OR AFFILIATE OF THIS DEE	PTCY CASE FILED BY O	OR AGAINST ANY PARTNI	ER	
Name of Debior	Case Number		Date	
Relationship	District	J.	udge	
ALLEGAT				
(Check applicable boxes)			COURT USE ONLY	
 	or relief may be entered unde	er title 11 of the United		
 a. ty The debtor is generally not paying such debtor's the subject of a bona fide dispute as to liability of 	or amount; or			
 b. a Within 120 days preceding the filing of this peti- agent appointed or authorized to take charge of debtor for the purpose of enforcing a lien againg 	less than substantially all of	the property of the		

Name of Debtor	FINANCIAL	RESOUR
mame of Debior		

Case No.	
+m.,,,,,,,,,,,,,	

Check this box if there has been a transfer of any claim ag	SFER OF CLAIM ainst the debtor by or to any petitio	oner. Attach all documents that
evidence the transfer and any statements that are required	under Bankruptcy Rule 1003(a).	
Petitioner(s) request that an order for relief be entered against the de petition. If any petitioner is a foreign representative appointed in a frecognition is attached.	ST FOR RELIEF btor under the chapter of title 11, Unit oreign proceeding, a certified copy of	ed States Code, specified in this the order of the court granting
Petitioner(s) declare under penalty of perjury that the foregoing is to correct according to the best of their knowledge, information, and be	ie and lelief.	
X	X	11/20/2009
Signature of Petitioner or Representative (State title) NH Banking Department Name of Petitioner Date Signed	Signature of Attorney Office of the Attorney G	
Name of Petitioner Date Signed	Name of Attorney Firm (If an 33 Capitol Street, Conc	y) ord, NH 03301
Name & Mailing Peter C. Hildreth	Address	
Address of Individual 53 Regional Drive Signing in Representative Concord NH 03301	(603) 271-3679	
Concord, NH 03301	Telephone No.	
X	X	11/20/2009
Signature of Petitioner or Representative (State title)	Signature of Attorney	Date
Name of Petitioner Date Signed	John L. Ahlgren	
Marie of Lentioner Date 2/8060	Name of Attorney Firm (If any PO Box 1211, Portsmou	') ith NH 03802
Name & Mailing	Address	
Address of Individual Dover, NH 03820 Signing in Representative Capacity	(603) 431-4522 Telephone No.	
x	X	11/20/2009
Signature of Petitioner or Representative (State title)	Signature of Attorney	Date
Name of Petitioner Date Signed	John L. Ahlgren Name of Attorney Firm (If any) PO Box 1211, Portsmout	h NILL 02002
Name & Mailing	Address	11 141 03002
Address of Individual Stratham, NH 03885	(603) 431-4522	
Signing in Representative Capacity	Telephone No.	
PETITIONI	NG CREDITORS	1
Name and Address of Petitioner	Nature of Claim	Amount of Claim
N.H. Banking Department	investigation fees & costs	42,750.00
lame and Address of Petitioner	Nature of Claim	Amount of Claim
Polly and Mark Johnstone	investment mgmt	400,000.00
ame and Address of Petitioner	Nature of Claim	Amount of Claim
Villiam N. Johnstone	investment mgmt	255,000.00
ote: If there are more than three petitioners, attach additional shee penalty of perjury, each petitioner's signature under the state and petitioning and the information in the formation and the information in the formation and the information and	ets with the statement under ment and the name of attorney	Total Amount of Petitioners' Claims 697,750.00
and petitioning creditor information in the format above.	n sheets attached	